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** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 01/29/2004				
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/MICHELE C FLOOD/</u> Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	STATE OR COUNTRY INDIA	SHEETS DRAWINGS 0	TOTAL CLAIMS 52
			INDEPENDENT CLAIMS 5	
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TITLE HERBAL COMPOSITION FOR THE TREATMENT OF GASTRIC ULCER				
FILING FEE RECEIVED 2370	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	